**AeHN** Alaska
eHealth
Network™
Secure Access to Your Health Record

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# Q&A: EHR Incentive Payments

By Paul Cartland
State of Alaska HIT Coordinator

Beginning in 2011, the Alaska Medicaid EHR Incentive Program is providing payments to eligible professionals and hospitals as they adopt, implement or upgrade and meaningfully use certified Electronic Health Records (EHR) technology.

### How can I find out more information about the Alaska Medicaid EHR Incentive Program?

You can find information about the program on the Alaska Medicaid State Level Registry for Provider Incentive Payments, web page http://ak.arraincentive.com/default.aspx, which is a centralized "one-stop" launching pad of available tools for providers to manage their EHR Incentive Program information. The portal will streamline the process in applying for the incentive payment and provide supportive resources throughout a provider's Health Information Technology (HIT) transition.

### Where can I find more information about whether or not I am eligible for the Medicaid EHR Incentive Program?

From the Alaska Medicaid State Level Registry for Provider Incentive Payments web page, (http://ak.arraincentive.com/default.aspx), there is a link to the Centers for Medicare and Medicaid Services (CMS) EHR Incentive Programs eligibility wizard, which steps a provider through determining if they are eligible for the Medicare or Medicaid program. Further information about the EHR Incentive programs can also be found on the CMS' EHR Incentive Program website: https://www.cms.gov/EHRIncentivePrograms/.

### I am ready to register for EHR Incentive Payments; what do I do next?

Once a provider is ready to start the registration process for EHR Incentive Payments, they should click on the "Want to get a jump start?" link from the Alaska Medicaid State Level Registry for Provider Incentive Payments web page, or use the following link: http://ak.arraincentive.com/jumpstart.aspx.

From this "jump start" web page a provider will be able to select their role: Individual Eligible Professional, Eligible Hospital, or Group Administrator. Once a role is selected, a new web page will appear that provides step-by-step instructions on what documentation is needed to register and the registration steps.

# EXCHANGE

## NEWS OF ELECTRONIC HEALTH TECHNOLOGY FROM ALASKA AND BEYOND

# President's Update

It's a busy time for AeHN as numerous projects are gaining positive momentum. I'm pleased to say we had 109 healthcare organizations, representing all parts of Alaska, sign up for the FCC Rural Health Care Pilot project. AeHN will manage the investment of over $10 million to improve broadband performance for healthcare organizations across the state with work beginning late summer 2011.

The Alaska Health Information Exchange project is in full swing with lots of activities to build a base HIE service that all healthcare organizations across Alaska can benefit from once complete in August 2011. Although the pilot phase is now scheduled to be complete later than the original planned April timeline, in this case, the delay was a wise and calculated decision to ensure fewer delays in subsequent project phases. Through strong partnerships with the State of Alaska HIT Director and DHSS, ANTHC and Orion Health, there is high confidence the HIE will deliver value in ways never seen before in Alaska and help healthcare organizations achieve meaningful use goals. Any questions regarding the HIE please contact AeHN's Executive Director, Bill Sorrells at bill@ak-ehealth.org.

Implementing an EHR requires staff that are knowledgeable on maintaining and supporting HIT technology to produce results a practice needs to achieve meaningful use. Our Regional Extension Center is working hard to help healthcare organizations, through the use of federal incentives and partnerships with a wide array of consulting specialists, to adopt or upgrade EHRs to meet meaningful use milestones. Any organization considering adopting or upgrading an EHR should first contact the director of the AeHN's Regional Extension Center, Jim Landon, at jim@ak-ehealth.org, to inquire about federal incentives available and joining the Alaska eHealth Network.

*Paul Sherry*

Paul Sherry
President

## AeHN Welcomes New Members

Welcome to the following providers, practices, and hospitals who have joined our network since our winter newsletter report. Be sure to check out the benefits of membership below!

- Alaska Center for Pediatrics
- Arctic Skye Family Practice
- Bethel Family Clinic
- Fairbanks Clinic
- Humanistic Healthcare, LLC
- Iliuliuk Family and Health Services, Inc.
- Leslie Bryant, MD, PC
- Orion Behavioral Health Network
- The Children's Clinic
- Valdez Medical Clinic

### AeHN Membership benefits you two ways, Now and Later!

**Now**- Take advantage of Regional Extension Center services to assist providers with EHR adoption and meaningful use. Services include readiness assessment, workflow design, IT support, training and more. Services are available to all providers and the federally funded program offers eligible providers up to $3,000 in services Free! It's like a gift card for EHR related services!

**Later**- Be a charter member of the electronic health information exchange (HIE) network when it launches in 2011. As a member you will be able to exchange key medical record information securely and privately with other providers, hospitals and labs to have the data you need at the point of care.

For additional information including a membership agreement, please contact Jim Landon at 866-966-9030 ext. 4 or jim@ak-ehealth.org.

# Why invest in an EHR?

## Benefits of EHR Adoption & Alaska's Regional Extension Center (REC)

### EHR Use is Like Learning a Sport - Practice Pays Off

After fully embracing EHRs, many practices report a financial return on their investment.

### EHRs Improve Quality of Care

Even basic EHR use improves care. Examples include: e-precribing with drug interaction alerts; electronic ordering of referrals and lab tests, and automatic reminders for better care of patients with chronic disease.

### Better Coding and Documentation = Financial Benefits

EHRs' decision-support templates create more accurate documentation and coding, which often leads to higher reimbursements.

### EHRs Increase Efficiencies, Productivity

Over time, improvement in practice productivity is often reported through elimination of multiple handling of patient forms, and quicker communications within the practice and with consulting providers.

### AeHN's REC - Help for Providers from EHRs to Meaningful Use

Alaska's Regional Extension Center offers providers discounted, high-quality services. One of 60+ such federally funded centers nationally, the Alaska REC offers a low, annual enrollment fee of $100 per FTE primary care provider. For this fee, eligible providers can connect to the Health Information Exchange (HIE) service and may receive up to $3,000 in REC services.

- REC Services: EHR Readiness Assessment; selecting an EHR & contracting with vendor; workflow design/re-design; training; implementation, and IT support.

*For more information or to enroll in Alaska's REC contact Jim Landon, REC Director at 866-966-9030 ext. 4, jim@ak-ehealth.org or visit www.ak-ehealth.org*

**Regional Extension Centers Program**

Awardee of The Office of the National Coordinator for Health Information Technology

# AeHN Announces Health Information Technology Director

*By Bill Sorrells, Director AeHN*

AeHN is pleased to announce that Joseph Furrer has joined the AeHN team as the Health Information Technology Director. He will lead the way to build Alaska's Health Information Exchange (HIE). Joseph has worked in the healthcare field for over 20 years with an administration and information technology background and brings to AeHN solid project management skills to ensure AeHN builds an HIE in which all Alaskans can be proud.

AeHN will be creating the health information exchange services for Alaskans through collaborative participation of healthcare organizations on committees and workgroups, the State of Alaska Department of Health & Social Services and the State's HIT Coordinator, plus other key partners including our HIE vendor, Orion Health. The foundation of the HIE, however, is the healthcare organizations joining AeHN and securely sharing health information from their EHRs for use in real time at the point of care.

**For a presentation or questions** on the Alaska HIE, please contact AeHN Director Bill Sorrells, at bill@ak-ehealth.org.

Joseph Furrer

# Light in the darkness:
## Peninsula Internal Medicine goes digital

*By: Jonathan McDonagh, MD*

Nearly two decades of caring for some of the Kenai Peninsula's most medically complex patients has left us with a room full of paper charts as deep and thick as the surrounding forest's black spruce. Their heft is familiar with tales of joy and tragedy, lives broken and sometimes healed, all inscribed on their frail papyrus pages. And we have ailed with the common symptoms of paper: missing charts, lost labs, sticky notes stuck to the wrong chart, and more. Our ills were growing exponentially for our practice of five physicians, a nurse practitioner, and a physician's assistant. We had to change, we knew we had to change.

Enter Greenway, our beacon in the night. Three years of pre-contemplative meditation and a robust government promise led to our choice of this software package. We looked at several options and with the clarity of hindsight, I can attest that no one system will be perfect for any one practice. Software architecture and user interfaces remain firmly planted a decade behind the sexy usability of Steve Jobs' latest creation while price-points are soundly medical. Wistfully, there is no iPatient or iDoc. Arguing in Greenway's favor was a more advanced, 'thin' software architecture that relied on server-side efforts that make setting up a network and maintaining it easier. The docs liked the way the clinical notes looked, and the method with which they are generated.

Practice Management. Like 'acne' or 'dementia' this term engenders not one feeling of warmth or serenity whatsoever. Smartly, most EMR companies implement this first. Greenway helped us develop a timeline to our liking by spreading the implementation over the theoretically quieter winter months. We hired Maxwell IT to buy our workstations and set up our network. With seven providers and some twenty-plus workstations, a less professional approach would have been disastrous. Though their closest office is in Anchorage, Maxwell has been able to commit enough visits in addition to remote assistance to get us up and running on schedule.

> ## "Last week I was able to see more patients in one day than I ever had previously.."
>
> — Jonathan McDonagh, MD
> Peninsula Internal Medicine

In January we went live with the clinical module. As if transported back to being a clerkship medical student, this included learning how to do everything all over again. Our mild mannered, super hero-in-disguise, project manager from Greenway made three trips to visit us from Texas over a two-month period to try and diffuse our anxiety. At the end of this phase we crawled out of the cave. The next year or two will be spent honing our efficiency. At least now we can function.

Last week I was able to see more patients in one day than I ever had previously.

We have been aided greatly by the AeHN. The efforts they put forth to hold conferences and research different EMR vendors and then narrow down the choices were very useful to us. We also benefited by a significant grant from AeHN's Regional Extension Center, which was used to defray our implementation costs. We were able to spread out our costs with financing and the anticipated government stimulus check. Thus, our 'bottom line' is okay, so far.

A couple of observations:

1. Server vs. a 'cloud' system (an application service provider, *ASP*) where the vendor hosts your software and data in some far-away data bank. We chose a server. Last week there was a brief power outage after which our internet service was out of commission for an hour. This would have destroyed our day if we had an ASP model.

2. Voice recognition. With the latest processors and Dragon software, I believe VR has finally crossed the line of usability. Not perfect, but pretty good.

3. Extra batteries for your laptops. Get them. Use them.

I end with a haiku:

*EMR is good*
*this mantra is getting old*
*I would not go back*

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## Alaska Banks Offer EHR Loan Programs

Both First National Bank Alaska and Northrim Bank are pleased to offer Alaska providers EHR loans to cover software, hardware, and upgrades. For more information please contact: **Northrim Bank**, Angela Freeman, freeman.angela@nrim.com 907-261-6206 or **FNBA**, Siri Hill, shill@fnbalaska.com, 907-777-5690

Northrim Bank

## Upcoming Webinars and Workshop

### "From EHRs to Meaningful Use"

• Webinar #3, June 8, 12-1:30 p.m.

• Fairbanks Workshop June 4, 8 a.m.-Noon

Registration & information at www.ak-ehealth.org
Space is limited, register soon!